

Docket No. 116511-00131



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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of: Jang-keun OH et al.

GAU: 1724

Serial No: 10/840,230

Examiner: Robert A. Hopkins

Filed: May 7, 2004

For: CYCLONE SEPARATING APPARATUS AND VACUUM CLEANER HAVING THE SAME

Commissioner for Patents
P.O. Box 1450
Alexandria, VA. 22313-1450

Sir:

Transmitted herewith is an amendment in the above-identified application.

- ☐ No additional fee is required
- ☐ This application qualifies for small entity status. 37 C.F.R. §1.27.
- ☒ Additional documents filed herewith: Fee Transmittal; Petition for One (1) Month Extension of Time (\$120)

Claims	Claims Remaining	Highest Number Prev. Paid		Number of Extra Claims	Rate	Fee
Total	14	20	-20	0	\$50	\$0.00
Independent	2	3	-3	0	\$200	\$0.00
		<input type="checkbox"/> Multiple Dependent Claims			\$360	\$0.00
		TOTAL OF ABOVE CALCULATIONS				\$0.00
		<input type="checkbox"/> Reduction by 50% for filing by Small Entity				\$0.00
		<input type="checkbox"/> Recordation of Assignment			\$40.00	\$0.00
		TOTAL				\$0.00

- ☒ A check in the amount of \$120.00 is attached.

- ☒ Please charge any additional Fees for the papers being filed herewith and for which no check is enclosed herewith, or credit any overpayment to deposit Account No. 23-2185. A duplicate copy of this sheet is enclosed.

- ☒ If these papers are not considered timely filed by the Patent and Trademark Office, then a petition is hereby made under 37 C.F.R. §1.136, and any additional fees required under 37 C.F.R. §1.136 for any necessary extension of time may be charged to Deposit Account No. 23-2185. A duplicate copy of this sheet is enclosed.

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Date: February 7, 2006



Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		Complete if Known	
FEE TRANSMITTAL For FY 2006		Application Number	10/840,230
		Filing Date	May 7, 2004
		First Named Inventor	Jang-keun OH et al.
		Examiner Name	Robert A. Hopkins
		Art Unit	1724
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Attorney Docket No.	116511-00131
TOTAL AMOUNT OF PAYMENT		(\$) 120.00	

METHOD OF PAYMENT (check all that apply)

☒ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☐ Deposit Account Deposit Account Number: 23-2185 Deposit Account Name: Blank Rome LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, **except for the filing fee**

☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

Total Claims 14 -20 or HP = 0 x Fee (\$): 0 = Fee Paid (\$): 0

HP=highest number of total claims paid for, if greater than 20

Indep. Claims 2 -3 or HP = 0 x Fee (\$): 0 = Fee Paid (\$): 0

HP=highest number of independent claims paid for, if greater than 3

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets _____ -100 = _____ / 50 = _____ Number of each additional 50 or fraction thereof _____ Fee (\$): _____ = Fee Paid (\$): _____

4. OTHER FEE(S)

	Fee (\$)	Fees Paid (\$)
Non-English Specification, \$130 fee (no small entity discount)		
Other: (e.g., late filing surcharge): Petition for One (1) Month Extension of Time		\$120

SUBMITTED BY		
Signature	Registration No. (Attorney/Agent)	Telephone (202) 772-5800
Name (Print/Type)	Michael C. Greenbaum	Date February 7, 2006

If you need assistance in completing the form, 1-800-PTO-9199 and select option 2.

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